

Application or Docket Number

PA APPLICATION FEE DETERMINATION RECORD  
Effective December 29, 1999

09 / 623985

CLAIMS AS FILED - PART I

SMALL ENTITY TYPE ☐ OR OTHER THAN SMALL ENTITY

|          | (Column 1)       | (Column 2)   |
|----------|------------------|--------------|
| FOR      | NUMBER FILED     | NUMBER EXTRA |
| BASIC F  |                  |              |
| TOTAL C  | 55 minus 20 =    | 35           |
| INDEPEN  | MS 1 minus 3 =   |              |
| MULTIPLE | IT CLAIM PRESENT |              |

| RATE   | FEE    |    | RATE   | FEE    |
|--------|--------|----|--------|--------|
|        | 345.00 | OR | 840    | 690.00 |
| X\$ 9= |        | OR | X\$18= | 630    |
| X39=   |        | OR | X78=   |        |
| +130=  |        | OR | +260=  |        |
| TOTAL  |        | OR | TOTAL  | 1470   |

\* If the column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

SMALL ENTITY OR OTHER THAN SMALL ENTITY

|             | (Column 1)                       | (Column 2)                         | (Column 3)    |
|-------------|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | 55                               | Minus .. 55                        | =             |
|             | 1                                | Minus ... 3                        | =             |
|             | TION OF MULTIPLE DEPENDENT CLAIM |                                    |               |

| RATE       | ADDI-TIONAL FEE |    | RATE       | ADDI-TIONAL FEE |
|------------|-----------------|----|------------|-----------------|
| X\$ 9=     |                 | OR | X\$18=     |                 |
| X39=       |                 | OR | X78=       |                 |
| +130=      |                 | OR | +260=      |                 |
| TOTAL      |                 | OR | TOTAL      |                 |
| ADDIT. FEE |                 | OR | ADDIT. FEE |                 |

|             | (Column 1)                       | (Column 2)                         | (Column 3)    |
|-------------|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             |                                  | Minus ..                           | =             |
|             |                                  | Minus ...                          | =             |
|             | TION OF MULTIPLE DEPENDENT CLAIM |                                    |               |

| RATE       | ADDI-TIONAL FEE |    | RATE       | ADDI-TIONAL FEE |
|------------|-----------------|----|------------|-----------------|
| X\$ 9=     |                 | OR | X\$18=     |                 |
| X39=       |                 | OR | X78=       |                 |
| +130=      |                 | OR | +260=      |                 |
| TOTAL      |                 | OR | TOTAL      |                 |
| ADDIT. FEE |                 | OR | ADDIT. FEE |                 |

|             | (Column 1)                       | (Column 2)                         | (Column 3)    |
|-------------|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             |                                  | Minus ..                           | =             |
|             |                                  | Minus ...                          | =             |
|             | TION OF MULTIPLE DEPENDENT CLAIM |                                    |               |

| RATE       | ADDI-TIONAL FEE |    | RATE       | ADDI-TIONAL FEE |
|------------|-----------------|----|------------|-----------------|
| X\$ 9=     |                 | OR | X\$18=     |                 |
| X39=       |                 | OR | X78=       |                 |
| +130=      |                 | OR | +260=      |                 |
| TOTAL      |                 | OR | TOTAL      |                 |
| ADDIT. FEE |                 | OR | ADDIT. FEE |                 |

If less than the entry in column 2, write "0" in column 3.  
If "Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
If "Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
"Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.